

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Cruz for President**

**A. Full Name (Last, First, Middle Initial)**

**PETER ZOMBORI**

Mailing Address 47898 JANET LN

City	State	Zip Code
LEXINGTON PARK	MD	20653-2533

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
U.S. NAVY

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

**Transaction ID : SA17.206930**

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		25		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2000.00

**B. Full Name (Last, First, Middle Initial)**

**MRS. LISA ZOOK**

Mailing Address 5436 HOLLY SPRINGS

City	State	Zip Code
HOUSTON	TX	77056-2022

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.224104**

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**C. Full Name (Last, First, Middle Initial)**

**EMMANUEL ZULUETA**

Mailing Address 2008 GREYHAWK PLACE

City	State	Zip Code
APEX	NC	27539-9309

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17.233741**

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

**Subtotal Of Receipts This Page (optional)**.....

4950.00

**Total This Period (last page this line number only)**.....